## DEST AVAILABLE COPY

	MULTIPLE DEPENDENT CLAIM FEE CALCYJA ATION SHEET								SERIAL NO.				FILING DATE		
(FOR USE \ H FORM PTO-875)								APPLICANT(S,							
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PTO - 1360	(REV. 11/04)								P	S. DEPART	MENT of CO Idemark Office	MAIERCE «			